

# CLAIMS ONLY

SERIAL NO.	FILING DATE
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APPLICANT(S)
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## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		/				
3		/				
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TOTAL IND.	2					
TOTAL DEP.	17	→	→	→	→	→
TOTAL CLAIMS	19					

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IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		→	→	→	→
TOTAL DEP.		→	→	→	→
TOTAL CLAIMS		██████████	██████████	██████████	██████████

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS